



# Applying Systems Thinking to Improve Special Education in Ohio

By Nathan Levenson

Foreword by Bart Anderson and Terry Ryan  
September 2012



## TABLE OF CONTENTS

<b>Foreword</b> .....	<b>2</b>
<b>Purpose and Goals:</b> Ohio students deserve more learning and Ohio taxpayers deserve less spending .....	<b>4</b>
<b>Opportunities</b>	
#1: Expand the role of Educational Service Centers through the power of the free market .....	8
#2: Encourage the Ohio Department of Education to create the context for accelerating the shift to more results-oriented, cost-effective special education .....	13
#3: Make school districts the hubs of integrated services from many state agencies .....	17
<b>Conclusion</b> .....	<b>21</b>
<b>Appendix 1:</b> Selected funding data .....	
1a: FEDERAL funds available for a systems-thinking approach to supporting students with special needs or similar needs .....	22
1b: STATE/LOCAL Funds available for a systems-thinking approach to supporting students with special needs or similar needs .....	24
<b>Appendix 2:</b> About the research .....	<b>27</b>

## FOREWORD

Ask superintendents or school leaders in Ohio what their toughest challenges are and most will put special education at the top of the list. Special education in Ohio – like in other states – is a maze of complexity, highly bureaucratic and compliance-driven, often a point of contention between educators and parents, frequently litigious, and the single fastest growing portion of spending on public education.

From 2004-05 to 2008-09 (the last year data were available) spending on special education in the state grew by 25.2 percent while total K-12 enrollment was essentially flat and overall K-12 spending grew by 12.5 percent. Despite the spending, children receiving special education services struggle to perform well academically. In 2010-11, just half of Ohio students with special needs scored proficient or better in reading, while in mathematics, more than four in ten students receiving services were performing below proficient. Tougher yet, more and more children in Ohio are being identified as students with disabilities, the identification rate reaching 14.8 percent of all students in 2010-11. Ohio has seen a 1.8 percentage-point increase in the number of students identified with special needs since 2000-01. This is the fifth fastest growing percentage increase in the country after only New York, Vermont, Wyoming and Pennsylvania.

Ohio and its schools have a legal and moral responsibility to provide the highest possible educational services to some 259,000 students with special needs. No one doubts that the state's districts and schools take this responsibility seriously. However, we need to find ways to do it better and in ways that at least slow the growth in new spending or we risk seeing special education spending crowd out needed resources for general education.

It was the realization that Ohio has to improve not only the quality of its special education services but also its cost effectiveness that led us to Nate Levenson. Levenson is one of the country's leading thinkers on doing more with fewer resources in special education. He has an impressive background in both business (an M.B.A. from Harvard and more than a decade of experience running a multimillion-dollar company) and education (former superintendent of Arlington Public Schools in Massachusetts). As superintendent Levenson built partnerships with local nonprofits to provide – at little or no cost – psych counselors, social workers, family counseling, drug and alcohol counseling, and more to help keep students safe from substance abuse and stress.

In this paper Levenson uses systems thinking to provide some common sense ideas for saving money while improving services for students. Ohio spends \$7 billion annually to serve the state's children with special needs but these resources are allocated in complicated and fragmented ways. Spending is “siloed” not only across the K-12 education landscape but also across a dozen or more state and county agencies. In fact, Levenson reports that “less than 50 percent of funds that help provide children receiving special education services are officially special education dollars.” He shows how Ohio can break down some of the silos, better integrate services, and in the process not only stretch the dollars but better serve students.

For example, by lifting the current ban on the use of speech and language assistants for the state's 30,000 students with Individual Education Plans (IEPs) that require only speech and language services Ohio's schools could save \$100 million a year statewide and not reduce one minute of service to students. These types of transitions to a continuum of clinical care options are consistent with health care continuums that are emerging to provide an appropriate – and economical – level of service to every student.

Or, building on his experience in Massachusetts, Levenson describes how Ohio could use funds and experts from the Department of Alcohol and Drug Addiction Services and the Department of Mental Health to provide counseling services in schools for eligible students. Levenson calls this a "Match Made in Heaven," and describes how it could result in multiple benefits at lower costs including: a) better access for students, b) more expert counselors; c) more students served; and d) relief for school leaders who are currently asked to provide services to students they are ill-equipped to offer.

We are profoundly appreciative of this piece of work by Levenson. We hope and believe it can help Ohio improve the services provided to children with special needs while also making the system more responsive to the fiscal challenges facing the state and school districts. Thanks also to the Ohio Department of Education for their help in providing Levenson with the necessary data and facts to bring this report to life, and special thanks to Barb Mattei- Smith, Associate Policy Director for Education, Office of the Governor of Ohio, for sharing her experience, insights and expertise all along the way.

Research help was provided by Rachel Cai and Keith MacLeod, both of The District Management Council, and Emmy Partin, Director of Ohio Policy and Research at the Fordham Institute. With their help and the gift of time and wisdom provided by the many thought partners interviewed, we hope that this paper will serve the students and taxpayers of Ohio well.

Thanks also to Aaron Churchill and Jeff Murray of the Fordham Institute for their assistance in guiding this report to publication and to Andy Kittles for his graphic design skills.

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## PURPOSE AND GOALS

### **Purpose and Goals: Ohio students deserve more learning and Ohio taxpayers deserve less spending**

This report was written at the request of the Thomas B. Fordham Institute and the Educational Service Center of Central Ohio, to inform the discussion of state-level policy makers and other stakeholders on how to improve the quality and cost-effectiveness of services provided to Ohio's students with special needs. It is critical for Ohio to find ways to deliver high-quality cost-effective services given the state's and school districts' persistent fiscal challenges.

Funding of special education is not a new topic for policy makers, but this report looks at it from a new perspective—applying systems thinking across all relevant funds, agencies, and service providers. Simply put, systems thinking views all the parts of a system in the context of and in relation to the other parts, rather than as isolated elements. Optimizing the entire system as a whole yields better outcomes with fewer unintended consequences than analyzing and improving each element on its own. When done well, systems thinking can create a reality in which the whole is greater than the sum of its parts.

Ohioans should demand a new approach to serving students with special needs in Ohio. The current system is neither adequate to prepare students for a globally competitive twenty-first century work place nor financially sustainable in an era of declining budgets. In 2010-11, just half of students with special needs scored proficient or better in reading, the gateway skill to all other learning, compared to over 87 percent of their nondisabled peers. Given the higher standards coming under the Common Core in 2014-15, these results will likely drop further.

This lackluster student academic performance isn't due to lack of effort or spending. From 2004-05 to 2008-09 (the last year state data are available), spending on special education in the state grew by 25 percent while total K-12 enrollment was essentially flat. In a world of limited resources, this means special education spending is crowding out spending on general education.

Funding for meeting the needs of children with disabilities in Ohio is complicated and comes from a host of sources:

- Federal grants targeted to special education such as the Individuals with Disabilities Education Act (IDEA), which are administered through the Ohio Department of Education.
- Federal grants targeted to other groups of struggling students, many of whom also have special needs, such as Title I. These are also administered through the Ohio Department of Education.
- State funding specific to special education. The Ohio Department of Education allocates these funds based on the category of student need and the number of students within that category in each district.
- General state funding for public schools, since targeted special education funding seldom covers the full cost of serving students with special needs.

- Local tax dollars for education.
- Local funds for mental health or disability boards.

The ecosystem that serves students with special needs in Ohio is large and wide, extending well beyond K-12 school districts. It includes:

- Preschools and child care providers
- Head Start and Early Head Start
- County and Regional Educational Service Centers (ESCs)
- Ohio School for the Blind
- Ohio School for the Deaf
- Ohio Department of Education (ODE)
- Ohio Department of Alcohol and Drug Addiction Services (and county-level boards)
- Ohio Developmental Disability Council (and county-level boards)
- Ohio Department of Jobs and Family Services (and county-level boards)
- Ohio Department of Mental Health (and county-level boards)
- Ohio Department of Rehabilitation and Corrections
- Ohio Rehabilitation Services Commission
- Ohio Department of Youth Services

This report suggests opportunities to create greater operational effectiveness and efficiencies by more formally integrating statewide agencies to serve children with disabilities.

Currently less than half of funds that help provide children with special education services are officially special education dollars. As Table I below indicates, Ohio specifically allocated \$3.2 billion to its public school districts for special education. Yet Ohio spent an additional \$3.8 billion on students with special needs through indirect spending to public school districts and to various statewide agencies and program providers. Across the entire special-needs system, therefore, Ohio spends approximately \$7 billion per year to serve kids with special needs. By better integrating all these efforts and expenditures, Ohio can stretch its funds further.

**Table 1: Summary of funds spent annually by Ohio schools and agencies on children with special needs**

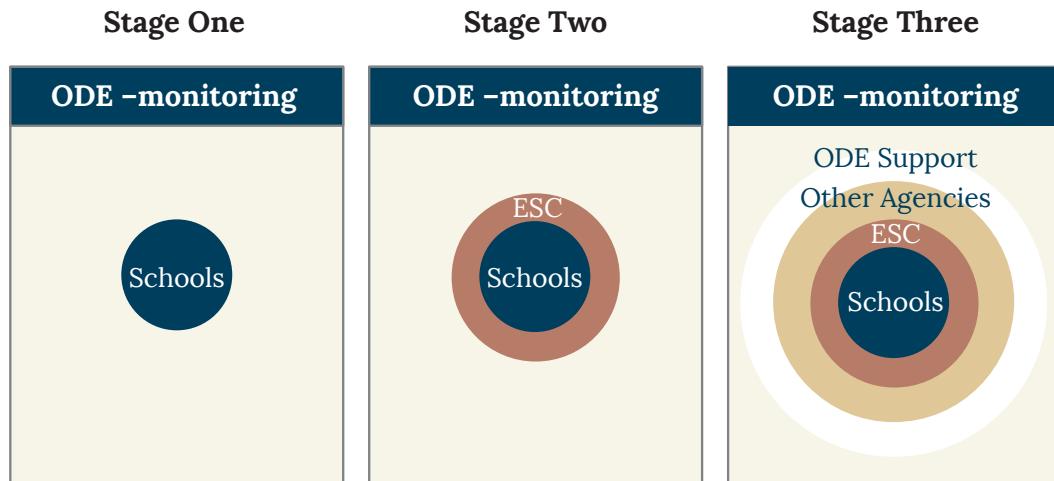
Public school support - direct special education	\$3,229,997,882
Public school support - indirect special education	\$1,630,000,000
Department of Developmental Disabilities	\$966,619,990
Department of Jobs and Family	\$322,796,287
Early childhood efforts	\$124,750,139
Department of Alcohol and Drug Addiction Svrs	\$109,069,829
Department of Mental Health	\$518,844,010
Department of Education	\$38,108,213
Ohio School for the Deaf	\$11,879,445
Ohio School for the Blind	\$12,364,290
Other remediation/intervention efforts	\$2,787,853
Other Health and mental health efforts	\$2,769,954
<b>Grand total (approximate)</b>	<b>\$7,000,000,000</b>

Note: Figures only include the relevant portion of each agency's budget, not the entire appropriation. All figures are approximations since no definitive means exist to cleanly separate special education and related spending from other spending in certain line items. Spending figures are compiled from most recently available data, which covers multiple reporting years. This list is not exhaustive but the best that could be assembled given available data. It is likely that relevant portions of some other line items and agencies have been unintentionally excluded.

### **More than just K-12 school districts.**

In the early days of special education, K-12 school systems provided nearly all services to students with special needs under the direction and monitoring of the Ohio Department of Education. Over time, regional Educational Service Centers (ESCs) became another avenue to provide services to students with special needs. It was reasoned that the ESCs would increase performance and cost-effectiveness by providing economies of scale and specialized expertise for students with severe, low incidence special needs.

As Ohio's school districts face declining resources and growing needs of students with disabilities, the time has come to look hard at all existing agencies and existing funds and ask: How can these parts work together as a coherent, interrelated system to provide instructionally effective and cost-effective services to students with special needs? As new players are brought formally into the special education ecosystem, the existing members—school districts, ESCs, and ODE—must also change and adjust, as illustrated on the next page.



With the passage of Education for All Handicapped Children Act (the precursor of IDEA) in 1975, school districts were expected to meet the needs of students with disabilities and the state played a significant monitoring and compliance role.

As districts struggled to cost-effectively meet the needs of serving some students with special needs, ESCs provided expertise and economies of scale, especially for students with severe disabilities.

In the future, students, districts, and taxpayers will be better served if a wider range of players work as a coordinated system to serve students with special needs and if ODE separates its monitoring/compliance role from its support role. The school district remains the center and coordinator of the entire system of educating students with disabilities.

This report offers ideas to start the conversation of how systems thinking can help Ohio and its school districts improve the performance and cost-effectiveness of serving students with special needs. The state is of course, constrained to some degree by federal regulations for compliance and Maintenance of Effort (MOE) requirements that require districts and states to hold constant spending on special education. Fortunately, both IDEA and MOE provide states with some room to improve how they serve their special needs students within federal regulations.

## OPPORTUNITY 1

### Opportunity #1: Expand the role of Educational Service Centers through the power of the free market.

Ohio's 56 Educational Service Centers have for many decades provided economies of scale in serving students with special needs, especially those with low incidence disabilities. Policy makers thought that each school district on its own may not have enough students or the expertise to serve students with less common needs. By consolidating programs county-wide, better and more cost-effective services could be provided. This theory has turned out to be a reality. Many ESCs provide high quality, cost-effective services. The time to expand these successes, however, has come, and done well this will improve services for more students while also reducing the cost to district budgets.

#### **Build from existing strength.**

As a regional provider of special education services (as well as other services), ESCs have inherent advantages compared to nearly all standalone K-12 districts.

- **Scale:** Ohio has 613 traditional public school districts, which is far more than other states, adjusted for school-age population. Additionally, there are 350 charter schools that also provide services to students with special needs. The large number of very small and midsized districts and schools means that few K-12 systems have economies of scale, especially for serving students with special needs who typically account for 10 to 15 percent of a district's total enrollment.

A district with 1,000 students might have just 100-150 special education students total and only two or three students with autism. Even a district with 5,000 students (and Ohio has many), will have small cohorts and little scale for serving students with severe disabilities.

- **Technical expertise:** The number of students in Ohio with severe disabilities is rising, placing greater demands on district staff who are oftentimes more experienced in working with students with mild disabilities. Some ESCs bring high levels of expertise in fields such as autism, behavior, or cognitive disabilities. These are not just smart former school staff, shared between districts, but often highly specialized experts not likely found in many districts.
- **Strength in numbers:** Changes in special education practices and policies nearly always have a political side to them. The politics can derail a worthwhile district effort. The same change, enacted by many districts via an ESC can better withstand political pushback, because parents have more confidence that the changes are sound when multiple districts decide to move together.
- **Subcontracting with fewer limitations:** All district teachers, including special education teachers, therapists, and psychologists are part of local collective bargaining units. Some contracts place significant restrictions on district flexibility for staffing, benefits, and work rules. ESCs, as a subcontractor, may be able to provide staff with no or fewer workplace limitations and thus lower costs for schools and districts.

### **1a. Shift ESCs from a geographic focus to areas of expertise.**

Educational Service Centers have historically served a geographic area based on political subdivisions. Lines on a map (traditionally a county), not the needs of districts, create the traditional members of each ESC. It is not uncommon for a single ESC to include a large urban district with many students living in poverty, small urban districts, midsized middle class districts, midsized upper income districts, and small rural districts. Other than proximity, these districts may have little in common. It is hard for one ESC to meet such a wide range of needs.

Allowing ESCs to think beyond geography and instead specialize could increase their expertise, value, and efficiencies. Rather than every ESC providing a very wide array of the services the 56 ESCs could specialize based on the needs of districts in their part of the state. In a given region, the current ESCs could specialize to meet the needs of nearby districts. There are a number of options for how this specialization might take place:

- **Specialize by type of district:** Perhaps a handful of ESCs could serve the state's urban districts while others concentrate on suburban and rural districts, catering to their unique needs.
- **Specialize by area of expertise:** Even with the scale of an entire county, an ESC can't be an expert in everything. ESCs could focus on specific areas of expertise such as: helping students with behavioral needs or autism, implementing responses to intervention (a lower cost, research based, and more effective means of serving some students who would otherwise be referred for special education services), teaching English language learners, and optimizing transportation and staff schedules.
- **Specialize by special education services provided:** Some ESCs could provide support for implementing reading interventions, others might run programs for students with autism, or provide speech therapists or scheduling services. Providing these services statewide would increase competition, scale, and quality levels, while reducing costs.

There are few, if any, examples in the private sector of specialized service providers limiting their service region to small political subdivisions. Typically strong providers grow from local to larger regions to national in scope. Strong ESCs could, if allowed, likely follow a similar path.

ESCs could be recreated along some predetermined line of specialization, or free market forces could be allowed to shape the realignment. In either case, regulations and expectations need to be revised to create a context that fosters healthy expansion, competition, and specialization. One organization can't be an expert in every field, and specialization can create more and better services for children with disabilities. How many ESCs are required in a world of specialization is an open question, but given driving distances and the diverse needs of students there is a significant need for strong ESCs able to provide services for children with special needs.

**1b. Empower and encourage ESCs to tackle pressing special education challenges that could be overcome by shared, collective, regionalized solutions.**

At some time in the past, nearly every political subdivision had its own library, police dispatch, 911 center, and more. Each city or town tried to provide most services on their own. As finances have tightened, cities and towns across the country have regionalized these efforts and when managed well, have lowered costs, improved quality, and even expanded services (such as longer hours of operation).

Sometimes, it is just hard for a single district to improve both their performance and the cost-effectiveness of delivering special education services. A look back over the last 20-years reveals a picture of slow progress but not substantial improvement. This is not because districts don't want to improve or don't know how, but because capacity and political pushback get in the way.

When many districts pool their resources to develop and lead improvement plans, they are more likely to implement changes successfully. Full-time staff can be dedicated to the project, rather than small bits of many people's time spread across the districts. Beyond the pooling of resources, collective efforts pool political capital, thus helping to minimize the inertial forces that keep the status quo in place.

To ensure that the benefits of economies of scale aren't washed away by the potential inefficiencies of large bureaucracies and the pressure to employ local residents or district staff, any such regionalization is best done within a context of healthy competition from multiple providers.

An alternative to competition would be performance contracts with clear measures of efficiency and quality. If a provider can't meet the cost and performance targets that beat standalone district results, then another entity would be given the work. **Whatever the means developed to create these shared, regionalized efforts, it is important that the new roles are earned, not granted.** When school districts can choose providers, a powerful and beneficial incentive system is created. The ESCs are incentivized to create effective and cost-effective services and the districts are encouraged to demand the same (or switch providers).

High impact opportunities include:

- Better identification of students with disabilities: No clear, unambiguous definition of special needs exists for students having a disability. This vagueness creates great variation in the rate of identification from district-to-district and from school-to-school. This means that the same child might or might not receive special education services depending on the building he or she attends. Under-identification is unfair to students and over-identification isn't good for the student or for district budgets. The ambiguity also is an opening for parents and teachers to push for special services when in fact the student may just be struggling academically, but doesn't have a learning disability.

An ESC could, with input from member districts, set less ambiguous criteria for eligibility and exit from special education. They could provide initial and/or second opinion assessment services for many districts. This could create greater consistency if the assessment teams were expected to apply the agreed-upon criteria consistently. Actual IEPs would be written at the school level.

- Develop and provide criteria, scheduling, training, and staffing for paraprofessionals: Like special education eligibility, which students get help from paraprofessionals varies greatly from school to school and district to district. In most districts, few guidelines exist for if, when, and how much paraprofessional support is warranted. Even fewer guidelines exist for when support is no longer needed, or when less support is warranted. Furthermore, in many districts, paraprofessionals receive little training and less supervision.

A number of ESCs could create deep expertise in this area, develop criteria jointly with districts, and then hire, train, deploy, and supervise paraprofessionals. This could potentially raise the quality of services dramatically and lead to more cost-effective approaches as well. If ESCs hired paraprofessionals, they may not have as many restrictive work or compensation limitations as school district staff.

- Special education transportation: Few areas are riper for benefiting from a regional effort than special education transportation. When students from nearby districts share a ride, costs decrease significantly. Moreover, small districts often struggle to have transportation routing expertise in house, whereas a regional effort could share top notch talent, expertise, and logistics.

#### **1c. Encourage the strongest ESCs to flourish and expand by “earning” district dollars.**

In terms of direct funding, ESCs receive only a small amount of funds from the state, about \$35 million in FY 2012. The rest of their budgets are fee-for-service from local school districts and charter schools. The reality is more complex.

ESCs were established on county lines and have long standing relationships with their member districts. The common practice of hiring retired staff from member districts and a sense of local pride or obligation can morph many ESCs into mini-monopolies, which have a lock on shared services in a given county. Until the most recent state budget, HB 153 (129th General Assembly), districts could choose to go it alone, but couldn't, in many cases, realistically select a different shared service provider. This minimizes the benefits of ESCs. As many of our interviewees stated, “Some ESCs are better than others,” yet strong ESCs are limited in their growth, and weaker ESCs are protected from robust competition.

HB 153 has given school districts the ability to select those ESCs they want to partner. This is an important first step. If school districts feel empowered to purchase special education services from multiple shared service providers, then market forces would encourage ESCs to provide even better services at lower costs. ESCs unable to provide instructionally effective and cost-effective services would shrink, or move into other service niches.

Examples from other states suggest this change will be slow to realize its full potential. Massachusetts, for example, has 31 organizations similar to ESCs called collaboratives. They have long been able to compete across their traditional geographic boundaries, but decades later, few districts have shifted their allegiances. Both superintendents and collaborative leaders openly talk of the importance of loyalty and a general discomfort with market competition. To maximize the new opportunities provided to ESCs, a robust market place must be developed. See Opportunity 2d.

ESCs already improve the quality and cost-effectiveness of services provided students with special needs. Ohio can build on this strength, however, by creating a context for entrepreneurial, results-oriented, high-performing Educational Service Centers to expand. The Ohio Department of Education could accelerate this process by providing the performance and cost data of ESCs to both schools and parents. This would not only make them better informed consumers but also help foster competition for services.

## OPPORTUNITY 2

### **Opportunity #2: Encourage the Ohio Department of Education to create the context for accelerating the shift to more results-oriented, cost-effective special education.**

The Ohio Department of Education (ODE), like all State Education Agencies (SEAs) across the country, plays many roles related to providing special education services. ODE develops and interprets regulations, monitors compliance with state and federal requirements, acts as fiscal conduit for many federal grants, facilitates the special education appeals process, and provides technical assistance. The department also develops and manages the state's accountability system.

While all these roles are important, the compliance role seems to color most of the others. As conduit for federal dollars, ODE is tasked with ensuring those dollars are spent per the grant requirements and that districts stay in compliance with federal regulations. This, by its nature, places the department in an adversarial/watchdog role with districts, which in turn makes it difficult for ODE to be perceived as a "partner" for district improvement efforts. Department staffers, who have a background in compliance, also tend to view technical assistance through a compliance lens.

Given the federal mandate for compliance, it is unlikely that the department can or should shed its watchdog role. Moreover, federal dollars fund roughly half of its staff. With this in mind, there are a number of ways in which ODE can accelerate the shift to better student outcomes at lower costs.

As the state has wrestled with budget shortfalls, department staffing has shrunk. ODE manages a budget of many billions, but all told, its staff earns about \$8.5 million in compensation from the state budget. Refocusing, not cutting, is the best way to create the context for spreading cost-effective approaches to serving students, while ensuring better outcomes at lower costs.

#### **2a. Separate technical assistance from compliance responsibilities by creating a market place of approved providers of technical assistance.**

Since it is difficult to both check for compliance and offer help, separating these roles would increase district receptiveness and the impact of technical assistance. ODE can screen and approve a cadre of individuals and organizations to provide technical assistance. Schools and districts that would normally be offered technical assistance by the department could select from the approved providers. Currently, the department does partner with a few outside organizations to provide professional development and technical assistance. But, there is little in terms of market forces to ensure that high-value services are delivered in the most cost-effective manner.

A smarter special education delivery model should ensure that the most effective, best-value, and cost-effective providers will grow and support many districts, while less effective ones will have few, if any, clients. The model would also open up a wide range of potential providers of technical assistance, including ESCs, universities, nonprofits, for-profit organizations, and individual experts.

The Massachusetts Department of Elementary and Secondary Education (MA DESE), for example, has created a free market for approved providers of technical support to districts. In years past, MA DESE would hire technical assistance expertise and “give” the support to targeted districts. The support might be via permanent employees or subcontractors, but either way, it was a bit paternalistic. MA DESE selected the providers and paid them. The districts “accepted” the help. Sometimes it was an offer that couldn’t be refused, but not to worry. If the help wasn’t actually helpful, that wasn’t perceived as a big deal. In time the state-provided helpers left, and the districts went back to business as usual. The districts weren’t always invested in the technical assistance and if it was of limited help they took from it what they could and moved on.

MA DESE rethought technical support as part of Massachusetts’ Race to the Top efforts. The department screened potential technical support providers, and then allowed districts to select which of the preapproved providers they wanted as partners. This significantly increased the level of district engagement and added pressure on the providers to be responsive and cost effective.

Since each district was provided a budget, they could get more services from a less costly provider or switch providers if the technical assistance was ineffective given the needs or culture of the district.

**2b. Address the overidentification challenge by reducing ambiguity in determining who is eligible for special education services and reducing the incentive for overidentification.**

Rorschach and his famous ink blots proved that different people can look at the same image and each see very different things, in part, based on what they want to see. One patient looked at an ink stain and saw a boat on an ocean, while another looked at that same paper and saw a child at play. Sometimes determining special needs eligibility can be no more exact. ODE could:

- **Establish less ambiguous criteria** for determining a disability, especially the less defined specific learning disability and speech and language—the two most prevalent disabilities facing Ohio students.
- **Establish clear exit criteria** for when special education services should fade or end. Very few students ever stop receiving special education services.
- **Create a quick, low cost special education appeals process.** Fear of litigation, both the high cost and the countless hours, encourage districts to identify students who don’t have disabilities. For school districts, it is simply easier to fold, rather than stand their ground. In some private sector contract disputes, for example, both parties agree to binding arbitration, which is quicker and less costly.
- **Reduce any financial incentive to overidentification.** School funding systems also create an unintended incentive that overidentification is rewarded. Dollars flow to districts based on the number of children with special needs, adjusted for one of six levels of severity of the disability. If a district served more struggling students through general education (a best practice) rather than special education, they will see a decline in state funding.

**2c. Revise certification/licensure and workload regulations to shift instruction to high-skilled, content-strong staff and cost-effective models of instruction.**

No Child Left Behind (NCLB) elevated the importance of certification/licensure but left much latitude to individual states. A number of state regulations unintentionally raise costs, while reducing a student's access to highly skilled teachers. Obviously, the regulations were not intended to create this outcome—but they do. At their core, these regulations try to control how districts educate students with special needs rather than how well they educate them. A greater focus on results would provide districts with more room to implement improved practices at lower costs. Specifically:

**Rethink certification requirements.**

- **Reduce the importance of special education certification/licensure.** A teacher certified as an intervention specialist may be asked to teach reading, math, science, etc., but may have very little training in these particular subjects. Content strong teachers should provide instruction to students with mild to moderate special needs.
- **Ensure that general education teachers have training in teaching students with special needs.** Currently many general education teachers have little training in how to teach students with mild to moderate disabilities—students who will spend most of the day in their classrooms.
- **Ensure all teachers have expertise in reading instruction.** A student's inability to read is the primary cause of referral for special education services nationwide. Nearly all teachers require skill in this area, but many have little or no training.
- **Link recertification/licensure to student growth.** An effective teacher is by definition a teacher whose children are learning. A teacher, despite having all the required course work and experience but whose students show little growth year-after-year, doesn't have the skills that the certification process hoped to ensure.

Collectively these changes would reduce the need for referrals for special education services, improve the ability of general educators to address the needs of students with mild to moderate disabilities, and make it more likely that students would master grade level skills and no longer need special education services—all of which help kids and the budget.

**Rethink work load restrictions.**

ODE neither limits the number of students a math teacher can teach in a week, nor how many students are in a math class. Each district makes the decision. The state's accountability system provides feedback (and sanctions) if the decision was ineffective. Students receiving special education services, however, are treated very differently. Ohio sets very strict limitations on the number of students an intervention specialist can teach in one class or in a week. Few other states cap the teaching load of special education staff.

The caps are much lower than what many districts in other states have chosen. In some cases they create a need for twice as many intervention specialists as similar districts in

other states would have. Other special education staff beyond teachers, such as therapists and psychologists also have work load caps. Lifting these caps and adopting cost-effective best practices could save \$500 million to \$750 million a year across the state.

**Lift the ban on speech and language assistants.**

Speech and language impairment is the second most prevalent disability in the state, and roughly 30,000 students with IEPs only require speech and language services, while many more students with other disabilities also receive these services.

It is strange. An unskilled, untrained special education paraprofessional can (and does) provide reading and math instruction to students with disabilities. This is allowed and commonplace. A trained and certified speech and language assistant, however, cannot provide speech and language services in any Ohio public school. They can in almost every other state. These assistants, when working under the direction of a certified therapist, have been proven to be equally effective, and are twice as cost-effective! They earn less because they needn't have as advanced a degree as the therapist. They don't determine treatment plans, but rather implement the plans drafted by the costlier therapist.

Prudent use of speech and language therapists might save \$100 million a year statewide, and not reduce the quality or amount of services provided students one iota.

**2d. Create an information infrastructure to foster a free market system of services and support.**

Many of the opportunities presented in this paper embrace the power of consumers (districts, schools and parents) to select effective and cost-effective providers in a competitive marketplace. This includes ESCs or other pre-approved organizations such as universities, private experts, for-profits, or nonprofit organizations providing technical assistance. The goal is to shift, through customer selection, toward more effective service providers. Currently few performance measures are available for these services; thus history, proximity, and personal relationships might influence the choices made and eliminate many of the benefits. ODE can help create and manage a performance information exchange to help identify successful providers and create the context for informed decision-making.

In Massachusetts, for example, the SEA has screened and approved a cadre of organizations and individuals to provide support to districts in implementing key elements of Race to the Top including new educator evaluation protocols, using data to improve instruction, and district turnaround- rather than the SEA providing the support directly to the districts. In turn, the districts are allocated funds, which they may use with the preapproved vendors. Districts select providers based on their capabilities and track record of success. It has led to healthy, informed competition.

The near monopoly of districts providing special education services discourages private sector alternatives. Parents of students with special needs, however, often reach out to doctors, hospitals, or specialists to get an alternative opinion from the districts when they disagree with a recommendation for eligibility or services. Some children's hospitals and doctors have a booming practice in this field. The marketplace responded to a consumer need. There is every reason to believe that if school districts reached out for new providers, many qualified firms, organizations, and individuals would emerge.

## OPPORTUNITY 3

### Opportunity #3: Make school districts the hubs of integrated services from many state agencies.

The state of Ohio does much for students with disabilities through the public schools. But many agencies also help children outside of the schools. These include:

- Ohio Department of Drugs and Alcohol Addiction Services
- Ohio Department of Mental Health
- Developmental Disability Boards
- Ohio Department of Job and Family Services

While all these agencies help many of the same students, they work mostly in isolation, to the detriment of both students and taxpayers. By coordinating some services with school districts and moving some services physically to school buildings, more students can be served at lower costs.

#### 3a. Encourage the Ohio Department of Alcohol and Drug Addiction Services and the Department of Mental Health to provide special education services in public schools.

First, a bit of background information is needed. The Ohio Department of Alcohol and Drug Addiction Services (ODADAS), not surprisingly, provide drug and alcohol counseling services. The route these services are delivered, however, is a bit complex. The state provides funds to county boards, which in turn provide funds to local counseling providers. A similar parallel structure exists for mental health services. In each case, clients visit these clinicians at their offices, and some or all of the cost is paid for by state dollars (or Medicaid).

In a parallel universe, students with disabilities, including addiction or mental health issues, go to school and may have IEPs (Individual Education Plans) for similar special education services.

School administrators across Ohio report significant increases in the number of students with mental health issues. Kindergartners and even pre-schoolers are coming to school with severe mental health issues (common today, but very rare fifteen years ago), and drug and alcohol issues overwhelm many high schools. Despite the large and growing need, public schools provide insufficient counseling to students. It is not that they don't want to; rather, it is that they lack either a sufficient number of counselors and/or needed expertise.

#### A match made in Heaven

Agency-funded providers (ODADAS and Department of Mental Health) can help fill the gap by providing in-school counseling services for eligible students. The benefits are many:

- **Better access:** The students needing help come to school every day and counseling can be built right into their schedules. Currently, the students must go to clinicians after school and many won't/don't go due to the logistics of getting there, embarrassment, or because it is just too much effort.

- **Better trained counselors:** Typically, school-based providers of counseling services tend to be generalists, often with a special education or guidance background, while private providers often have more specific and appropriate training and expertise.
- **More students served:** Providing services in high schools, for example, offer many more opportunities to create small groups of students to serve at the same time, when appropriate. Since most providers are paid by the hour, serving three students at once costs the same as helping just one. These kinds of groups are less likely when provided outside of a school setting.
- **More focused school leaders:** The role of school administrators has expanded greatly beyond teaching and learning. Few principals or central office staff have deep expertise in mental health counseling or addiction. If experts from other agencies took the lead, school leaders could focus on their areas of strength and expertise.
- **Lower overall costs:** By using space in school buildings, the providers reduce their overhead costs, and if the schools handle scheduling and Medicaid reimbursement, then provider overhead is further reduced, allowing for lower hourly rates. Additionally, in some cases, market wages for private counselors are lower than school-based staff with more generous union contracts. Private providers funded through these agencies can also work part-time when the need is less than full-time, whereas district staff is much more likely to be employed full-time.

It is worth noting that a few school districts do integrate private providers and/or services from the ODMH and ODADAS into their districts, but it is not the norm in the Buckeye State. Fewer than a dozen schools have become certified sites for agency-funded services to routinely take place within the school. This should change.

Other examples of cross-agency cooperation in Ohio include: The Department of Mental Health, which provides support for the Ohio Mental Health Network for School Success and the Coordinating Centers of Excellence – these partnerships were developed to better coordinate mental health services; and ODE and the Ohio Department of Health, which collaborate on the Coordinated School Health Program. These are a good start, but fall far short of extensive integration.

One school district, Arlington (MA), for example, took this idea and ran much farther with it. The district of 4,500 students provided very limited mental health counseling through its guidance counselors, no addiction counseling, and no social work support. The need was great, but the budget had never provided such staff and it was actually shrinking. To meet the need the district created partnerships with graduate schools of psychology, state and local funded nonprofit counseling agencies, and insurance funded fee-for-service providers. All told, nearly \$1,000,000 worth of services annually was provided at virtually no cost to the district or its students. A small army of counselors, addiction experts, anger management specialists, and social workers helped hundreds of children in need.

**3b. Integrate early intervention, preschool, and K-12 services with public schools having a seat at the table.**

The last 40-years have seen a steady shift to earlier and earlier support for students with disabilities. By the time many students enter Kindergarten, they have already been receiving services for most of their short lives. These services are important for children, but also siloed, with each agency and program working separately, often to the detriment of the child, school district, and taxpayer.

A public school will provide the bulk of the services to students with disabilities, typically from Kindergarten to graduation. Despite providing the lion's share of services, K-12 districts often have the least (or no) input into many of the decisions about what services will be provided to these young children.

Parents of students with disabilities first enter the world of special education through one of many entry points, often before their child enters Kindergarten and the traditional public schools. What is said, done, or promised for the one or two years before entering school can set the expectations for a child's entire 15-year school career. This can "commit" public schools to a course of action with significant funding implications, yet keep them from having a seat at the table or much voice when decisions are actually made.

Some background here is needed. The Ohio Department of Health provides a number of school readiness programs, including Help Me Grow. The state also funds approximately two-thirds of the 3,000 plus special education preschool units statewide, and the local Developmental Disabilities Boards (DDs) provide most preschool services for three- and four-year-olds with cognitive impairment (formerly called mental retardation) and other students with severe disabilities. All told approximately 23,000 students with disabilities ages 3-5 are served by school districts, ESCs, and DDs. Early Intervention programs also provide other special education services to students starting at birth. The vast majority of these children will enter the public schools when they turn five and become the responsibility of their local school district. Prior to age five, K-12 districts have virtually no involvement in early intervention services and limited involvement in preschool decisions.

There are three problems with the current system—lack of coordination, overidentification, and setting undesirable future expectations.

Let's look at each separately. A primary goal of services for young children with disabilities is to prepare them for success in school, but the services aren't always based on the needs of schools or districts. Preschools, for example, don't always tightly connect their program and focus to district Kindergarten skills and context.

In urban centers, it is not uncommon to identify children of poverty as having a disability when they really just have a difficult home-life. Early Intervention staff can provide a student with a leg up in life and school, such as access to special education preschool, by identifying these students as having special needs. Because they are not tightly connected to the school or district, they don't realize that a special education designation for a student without a disability is often a path to lower expectations, less rigor, and less success in life.

The final drawback to others making decisions regarding special education services without K-12 at the table is that parent expectations get set early and “bind” the schools in the future. A caveat: technically, schools conduct a full re-evaluation of Kindergarteners, annual reviews, and a full re-evaluation of IEPs every three years in the future, but in reality, it is hard to change parent expectations once set. Assigning paraprofessional support is just one example of an expectation set in preschool that can be hard to undo later.

Since school districts will provide most of a student’s education and special education services, they should be part of the planning of the services for a student with disabilities from the beginning. This could take a number of forms:

- A seat at the table when decisions are made;
- Overall leadership of the process;
- Folding the budget, staff, and responsibility of these agencies into the school districts; and
- A free market approach would be able to shift the dollars and control to schools and school districts, who in turn would hire nonprofit, for-profit, government agencies, or Educational Service Centers to provide these services.

If the districts selected and paid the service providers, the service providers would have an incentive and a structure to better align with the long-term needs of students while also better preparing them for success in their K-12 education.

### **Some draw backs**

As the saying goes, there is no free lunch. Integrating more services into K-12 districts, including mental health, addiction, and support for very young children with disabilities isn’t without its headaches and challenges. Some students may not want to receive counseling at school for fear of social stigma. Offsite counseling will always be preferable for some students and their families.

The central offices of many school districts are shrinking, and placing more responsibilities on the remaining staff will be stressful. Coordinating early intervention and preschool services through a district’s special education department will add more complexity to an already difficult-to-manage department.

Further integration of services will also place challenges on partnering state agencies. They have all seen budget cuts and work under various and, at times, different directives and mandates. A thoughtful, inclusive, planning process will be required to maximize the chance of success.

If improving the quality of special education services and their cost-effectiveness was easy, most districts would have already solved the challenge. Fortunately, some of the efficiencies possible can free up funds to increase the quality of the management and leadership of special education programs.

## CONCLUSION

There are two points that almost everyone in the business of education can agree: finances are tight and students with special needs don't achieve at high levels, even students with mild disabilities. This leaves two choices: Accept the status quo of less money for K-12 education with the exception of special education, and continue seeing uninspiring student outcomes. Or find new approaches to help these children in a more instructionally effective and cost-effective way. By addressing the challenges from a system thinking perspective, Ohio can do better with less.

The road to better outcomes at lower cost will require multiple partners (ODE, state agencies, ESCs, school districts and school buildings) to travel this road together, rather than alone. By integrating their efforts, coordinating their policies, and playing to their strengths these partners can better serve students with disabilities at less cost. K-12 districts as the primary provider of services to students with disabilities should coordinate all services, from all agencies, at all ages until graduation.

Unfortunately, there is a limit to the wisdom of planners, and a truly effective and cost-effective system must also embrace market forces to raise the quality of services, create downward pressure on costs, and allow successful service providers to expand and less valued providers to fade. The Ohio Department of Education should and must provide oversight and compliance but can also create and foster a more competitive marketplace of providers including ESCs, universities, nonprofits, and private enterprise.

## APPENDIX 1

**Table 2: FEDERAL funds available for a systems thinking approach to supporting students with special needs or similar needs**

Recipient	Revenue Source	Amount
Public school support	Title 1A (Elementary and Secondary Education Act)	\$530,010,000
	IDEA	\$443,170,050
	Title I School Improvement	\$48,500,000
	21st century community learning centers	\$41,534,439
	IDEA Part B Federal Stimulus (ARRA)	\$21,866,803
	Title 1A Federal Stimulus (ARRA)	\$18,633,673
	Education of Exceptional Children	\$1,905,000
<b>Subtotal: Federal public school support</b>		<b>\$1,105,619,965</b>
Department of Developmental Disabilities	Developmental center and residential facility services and support	\$180,266,029
	Community social service programs	\$11,017,754
	DD Council	\$3,341,572
	<b>Subtotal: Federal/Dept. Of Developmental Disabilities</b>	<b>\$194,625,355</b>
Department of Alcohol & Drug Addiction Services	Substance Abuse Block Grant	\$69,000,000
	Demonstration Grants	\$8,675,580
	Administrative Reimbursement	\$300,000
	<b>Subtotal: Federal/Dept. of Alcohol and Drug Addiction Svrs</b>	<b>\$77,975,580</b>
Department of Mental Health	Mental health glock grant	\$14,200,000
	Social services block grant- distribution	\$8,400,000
	Federal grants administration	\$4,717,000
	Federal grant- community mental health board subsidy	\$2,500,000
	Federal miscellaneous	\$2,170,000
	Mental health block grant- administration	\$748,470
	Social services block grant- administration	\$50,000
<b>Subtotal: Federal/Dept. of Mental Health</b>		<b>\$32,785,470</b>
Early childhood efforts	Early childhood education	\$14,554,749
	IDEA Preschool Federal Stimulus (ARRA)	\$670,000
	Head Start Collaboration Project	\$225,000
	Striving Readers - ODE	\$180,000
<b>Subtotal: Federal early childhood efforts</b>		<b>\$15,629,749</b>

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**Table 2 (continued)**

Department of Education	Consolidated federal grant administration	\$8,949,280
	21st century community learning centers - ODE expenses	\$2,186,023
	General supervisory enhancement grant	\$500,000
	<b>Subtotal: Federal/Dept. of Education</b>	<b>\$11,635,303</b>
Ohio School for the Blind	Coordinating Unit	\$2,527,104
	Ohio Transition Collaborative	\$1,800,000
	Work Study and Technology Investment	\$698,521
	<b>Subtotal: Federal/Ohio School for the Blind</b>	<b>\$5,025,625</b>
Ohio School for the Deaf	Coordinating Unit	\$2,460,135
	Early childhood grant	\$300,000
	Educational Program Expenses	\$190,000
	Even Start fees and gifts	\$126,750
	<b>Subtotal: Federal/Ohio School for the Deaf</b>	<b>\$3,076,885</b>
Remediation/intervention efforts	Learn and Serve	\$619,211
	Neglected and delinquent education	\$2,168,642
	<b>Subtotal: Federal remediation/intervention efforts</b>	<b>\$2,787,853</b>
Health and mental health efforts	Drug Free Schools	\$1,500,000
	School Medicaid administrative claims	\$639,000
	Improving Health and Educ. Outcomes of Young People	\$630,954
	<b>Subtotal: Federal health and mental health efforts</b>	<b>\$2,769,954</b>
<b>Subtotal</b>	<b>Subtotal of Federal available funds</b>	<b>\$1,451,931,739</b>

Based on FY2012 appropriations

**Table 3: STATE/LOCAL funds available for a systems thinking approach to supporting students with special needs or similar needs**

Recipient	Revenue Source	Amount
Public school support	Foundation funding & property tax allocation for special education*	\$2,000,000,000
	Regular Instruction - Special Ed portion*	\$870,000,000
	General support services - Special Ed portion*	\$760,000,000
	Special education transportation	\$60,469,220
	Educational Service Centers	\$41,760,000
	Catastrophic cost supplement	\$10,000,000
	Alternative education programs	\$7,403,998
	School Psychology Interns	\$2,537,824
	Home instruction	\$2,206,875
	<b>Subtotal: State/local public school support</b>	<b>\$3,754,377,917</b>
Department of Developmental Disabilities	Shared local levies (Mental Health Developmental Disabilities)**	\$298,267,143
	County board waiver match	\$235,000,000
	Developmental Disabilities local levies	\$65,960,122
	Targeted case management services	\$57,307,357
	County boards subsidies	\$40,906,365
	Targeted case management match	\$21,000,000
	Developmental ctr direct care support	\$16,497,170
	Tax equity	\$14,000,000
	Operating and services	\$7,406,609
	Family support services	\$5,932,758
	Central administration	\$4,422,794
	Developmental ctr and residential operating services	\$3,414,317
	Intensive behavioral needs	\$1,000,000
	Program fees	\$685,000
	Supplement service trust	\$150,000
	Interagency workgroup - Autism	\$45,000
	<b>Subtotal: State/Dept. Of Developmental Disabilities</b>	<b>\$771,994,635</b>

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**Table 3 (continued)**

Department of Jobs and Family	Early care and education	\$123,596,474
	Child care match/maintenance of effort	\$84,732,730
	Adoption services- families who adopt children with special needs	\$70,343,101
	Support services	\$44,123,982
	<b>Subtotal: State/General</b>	<b>\$322,796,287</b>
Early childhood efforts	Preschool special education	\$84,459,542
	Early childhood education	\$23,368,341
	Child care licensing	\$827,140
	Early childhood support and technical assistance	\$465,367
	<b>Subtotal: State/local early childhood efforts</b>	<b>\$109,120,390 “</b>
Department of Alcohol and Drug Addiction Services	Statewide Treatment and Prevention	\$16,000,000 “
	Treatment Services	\$11,225,590
	Board Match Reimbursement	\$3,000,000
	Prevention Services	\$868,659
	<b>Subtotal: State/Dept. of Alcohol and Drug Addiction Svrs</b>	<b>\$31,094,249</b>
Department of Education	Personal services	\$8,579,178
	Indirect operational support	\$6,500,000
	Educational improvement grants	\$3,000,000
	School management assistance	\$2,842,812
	Career-technical education match	\$2,233,195
	Community schools and choice programs	\$2,200,000
	Interagency operational support	\$1,117,725
	<b>Subtotal: State/Dept. of Education</b>	<b>\$26,472,910</b>
Department of Mental Health	Shared local levies (Mental Health Developmental Disabilities)**	\$298,267,143
	Mental Health local levies	\$168,870,992
	Central administration	\$16,000,000
	Family and children first	\$1,386,000
	Pre-admission screening expenses	\$486,119
	Resident trainees	\$450,000
	Family and children first administration	\$448,286
	Special education- educating students in state hospitals	\$150,000
	<b>Subtotal: State/Dept. of Mental Health</b>	<b>\$486,058,540</b>

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**Table 3 (continued)**

Ohio School for the Deaf	Personal Services	\$7,842,339
	Maintenance	\$814,532
	Education Reform Grants	\$74,903
	Equipment	\$70,786
	<b>Subtotal: State/Ohio School for the Deaf</b>	<b>\$8,802,560</b>
Ohio School for the Blind	Personal Services	\$6,593,546
	Maintenance	\$619,528
	Equipment	\$65,505
	Education Reform Grants	\$60,086
	<b>Subtotal: State/Ohio School for the Blind</b>	<b>\$7,338,665</b>
<b>Subtotal</b>	<b>Subtotal of State/local available funds</b>	<b>\$5,518,056,153</b>

\* Based on 2008-09 Special Education Weighted Funds Fiscal Accountability report, which is the most recent available data. Appropriations are estimated based on a 2% increase per year and rounded. Other figures are FY2012 appropriations

\*\* Assumed to be split evenly between Department of Developmental Disabilities and Department of Mental Health for reporting purposes

## APPENDIX 2

### **Appendix 2: About the Research**

This policy paper was prompted by the bold, critical question: Can Ohio stretch its special education dollars to raise achievement at lower costs? This work was made possible by the generous funding of the Thomas B. Fordham Institute and the Educational Service Center of Central Ohio.

This paper draws upon a number of sources including:

#### ***The District Management Council's (DMC) previous nationwide consulting and research.***

DMC is a leader in supporting public school districts and state departments of education in raising achievement, improving operations, and reducing costs. Since its founding in 2004, the organization has supported a wide range of school districts across the country, from large urban districts with more than 200,000 students to small suburban and rural districts of 1,000 students or less. Our work has taken us to more than 38 states. Much of our work has focused on systems thinking in public education in general and in special education in particular.

Our knowledge management team conducts primary research studies and assembles best practices from across the country. DMC has built the largest database of special education staffing and costs, representing districts educating nearly one third of all students in the country and has published extensively on special education. For more information visit [www.dmcouncil.org](http://www.dmcouncil.org).

#### ***A deep understanding of special education in selected districts in Ohio.***

DMC has studied special education in-depth in 20 districts in the state and two leading ESCs. The districts range from large urban to mid-sized suburban to small rural. This experience in the state allows DMC to tailor its national perspective to the local context of Ohio.

#### ***Interviews with thought leaders, and current and former state officials.***

##### ***Bart Anderson, Superintendent, Educational Service Center of Central Ohio (ESCCO)***

Bart Anderson has led ESCCO as Superintendent since 2004. Dr. Anderson's previous experience includes service as Superintendent in Port Clinton, Put-in-Bay, and Isle St. George, Ohio.

##### ***Melissa Bacon, Assistant Policy Director for Health and Human Services, Office of the Governor of Ohio***

Melissa Bacon serves as the Assistant Policy Director for Health and Human Services (HHS), with responsibility for overseeing the day-to-day operations of the HHS cabinet agencies. She previously served as the director of legislative affairs at the Ohio Department of Job and Family Services (ODJFS). Ms. Bacon has also served as director of public policy and

advocacy for the Ohio Children's Hospital Association and worked for 14 years as a policy aide in the Ohio Senate.

**R. Greg Browning, President, Capital Partners**

R. Gregory Browning, Ph.D. is the President of Capital Partners, an Ohio-based public policy and management advisory firm. Prior to founding the company, Dr. Browning was the Director of the Ohio Office of Budget and Management, a gubernatorial cabinet appointment where he served as the state's Chief Financial Officer.

**Paolo DeMaria, Principal, Education First**

Paolo DeMaria has a unique blend of K-12, higher education, and public finance experience. Prior to joining Education First, Mr. DeMaria served as the Executive Vice Chancellor of the Ohio Board of Regents, Associate Superintendent for School Options and Finance for the Ohio Department of Education, Ohio state budget director, chief policy advisor to the governor, and finance director for the Ohio Senate.

**Sen. Peggy Lehner, Ohio Senate**

Peggy Lehner is currently serving her first term as the state senator for the 6th Ohio Senate District, which encompasses portions of Montgomery County. Ms. Lehner has a background in public service, having served one term in the Ohio House of Representatives as well as 10 years as a member of Kettering City Council.

**Barbara Mattei-Smith, Associate Policy Director for Education, Office of the Governor of Ohio**

Barbara Mattei-Smith currently serves as the Assistant Policy Director for Education in Governor Kasich's office. Previously, she served as the Associate Director for the Office of Policy and Funding at ODE, responsible for the computations and processes for the distribution of state payments to public school districts, community schools and various other entities providing educational services.

**David Osborne, Senior Partner, Public Strategies Group**

David Osborne is a senior partner of The Public Strategies Group, a consulting firm that helps public organizations develop and implement strategies to improve their performance. In addition, Mr. Osborne is the author or co-author of five books, including *The Price of Government: Getting the Results We Need in an Age of Permanent Fiscal Crisis* (2004).

**Terry Ryan, Vice President for Ohio Programs and Policy, Thomas B. Fordham Institute**

Terry Ryan is vice-president for Ohio Programs and Policy at Fordham and leads all operations in Ohio. He is the co-author of two books including *Ohio Education Reform Challenges: lessons from the frontlines* (2010). He is a research fellow at Stanford University's Hoover Institution, and is currently serving as a Commissioner for the Council for the Accreditation of Educator Preparation (CAEP).

**Melissa Snider, Policy Analyst, Capital Partners**

Melissa Snider is a policy analyst with Capital Partners, an Ohio-based public policy and management advisory firm. Her prior experience includes executive assistant for policy at

the Ohio Office of Budget and Management, program officer of the Columbus Foundation, and co-chair of a school district's successful operating levy.

***A review of state budget documents and previous reports.***

State budget documents and district-level reporting helped size the state's current financial commitment to serving students with special needs, disabilities, and at-risk characteristics.

This report also draws upon the valuable and insightful work of "Redesigning Ohio: Transforming Government into a 21<sup>st</sup> Century Institution," by David Osborne and Greg Browning, Ph.D., (2010), and the Report of the Early Childhood and Child Health Care Coordination team.

**About the author**

Nathan Levenson is a Managing Director at The District Management Council, an organization that partners with public school district leaders to improve student outcomes, operational efficiency, and resource allocation. As Managing Director, he oversees all consulting activities and directs the development of technology tools and systems to facilitate the implementation of best practices. Levenson previously served as superintendent of the Arlington, Massachusetts, Public Schools. He is a graduate of Dartmouth College and earned an MBA from Harvard Business School.

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